N1700000 9864

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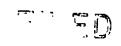
COVER LETTER

TO: Amendment Section Division of Corporations

ALBANIAN AMER NAME OF CORPORATION:	ICAN ORGANIZAT	TON OF SW F	LORIDA,INC
N1700009864 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this matte	er to the following:		
GENTIAN PURO			
	(Name of Contact Pe	erson)	
ALBANIAN AMERICAN ORGANIZATION OF SV	W FLORIDA, INC		
	(Firm√ Company	.)	
1855 VETERANS PARK DRIVE, STE 301			
······································	(Address)		
NAPLES, FL 34109			
	(City/ State and Zip t	Code)	
AAO.SWFL@GMAIL.COM			
E-mail address: (to be used	l for future annual rep	ort notification	1)
For further information concerning this matter, please	call:		
GENTIAN PURO	at	239	3984635
(Name of Contact Person) at	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	iyable to the Florida [Department of S	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certif Certif	0 Filing Fee icate of Status icd Copy tional Copy is used)
Mailing Address Amendment Section		eet Address lendment Secti	ion
Division of Cornorations		ision of Corne	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



ALBANIAN AMERICAN ORGANIZATION OF SW FLORIDA, INC

2019 SEP 11 PM 1:33

(Name of Corporation	as curren	tly filed with the F	lorida Dept. of S	State)
N17000009864				
(Docur	nent Numb	er of Corporation (i	f known)	
Pursuant to the provisions of section 617,1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	es, this <i>Florida Not</i>	For Profit Corpe	oration adopts the following
A. If amending name, enter the new name of the	e corporati	ion:		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		tion" or "incorpora	uted" or the abbr	The new eviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1855 VETERANS	S PARK DRIVE,	STE 301
		NAPLES, FL 341	 09	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1855 VETERANS	S PARK DRIVE,	STE 301
		NAPLES, FL 341	09	
D. If amending the registered agent and/or regi	stered offic	ce address in Flori	da, enter the na	me of the
new registered agent and/or the new register				<u></u>
GF Name of New Registered Agent:		LAKO		
	1855 VET	FERANS PARK DI	RIVE, STE 301	
No. 2 Berliet and AVE of the land			tFlorida street addr	ess)
<u>New Registered Office Address</u> :	NAPLES			34109 , Florida
		(City)		(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered u. Lam fai	Agent: miliar with and acc	ept the obligation	ns of the position.
		manye of New Re	istered Agent, if	changing

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	$\overline{\underline{V}} = \overline{\underline{M}}$	nn Doe ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	PETER BREGA	11983 TAMIAMI TRAIL N
Add			STE 101
X Remove			NAPLES, FL 34110
2) Change	V	DOĐONA ROBOCI	860 MEADOWLAND DR,E
Add			NAPLES, FL 34108
X Remove			
3) Change	P	GRIGOR LAKO	1071 ALBANY CT
X Add			NAPLES, FL 34105
Remove			
4) X Change	<u>v</u>	GENTIAN PURO	335 MELROSE PLAZA
Add			NAPLES, FL 34104
Remove			
5) X Change	T	ALTIN MELEQI	1434 SERRANO CIRCLE
Add			NAPLES, FL 34105
Remove			
6) Change	S	ENIADA XHOXHI	1415 TIFFANY LN #1308
X Add			NAPLES, FL 34105
Remove			

E. If amending or adding additional Articles, enter change(s) here:
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

·

08/18/2019	transfer of the second
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
09/01/2019	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
09/01/2019 Dated	
Charles States	
Signature	
(By the chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
other court appointed fiduciary by that fiduciary)	
other court appointed function by that nonctary)	
GRIGOR LAKO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	